Department of the Army Pamphlet 40–13

**Medical Services** 

## Training in First Aid and Emergency Medical Treatment

Headquarters
Department of the Army
Washington, DC
22 August 1985

**Unclassified** 

## SUMMARY of CHANGE

DA PAM 40-13 Training in First Aid and Emergency Medical Treatment

This first time printing of DA Pamphlet 40-13 supersedes Training Circular 8-1 dated 30 June 1976. This pamphlet outlines requirements and provides guidelines for training all Army personnel in medical emergencies (paras 5 and 6).

## Department of the Army Pamphlet 40–13

#### **Medical Services**

#### Training in First Aid and Emergency Medical Treatment

By Order of the Secretary of the Army:

JOHN A. WICKHAM, JR. General, United States Army Chief of Staff

Official:

DONALD J. DELANDRO Brigadier General, United States Army The Adjutant General

**History.** This UPDATE printing publishes a new DA pamphlet which is effective 22 August 1985

**Summary.** This pamphlet outlines requirements and provides guidelines for training all Army personnel in medical emergencies. It

fulfills the agreements in the North Atlantic Treaty Organization (NATO) Standardization Agreement (STANAG) and Quadripartite Standardization Agreement (QSTAG): NATO STANGAG 2122 and QSTAG 535, Medical Training in First Aid, Basic Hygiene, and Emergency Care.

Applicability. This pamphlet applies to the Active Army, the Army Nation Guard, and the U.S. Army Reserve. It applies without modification to both nuclear and non–nuclear warfare. It also covers medical emergencies that may occur in noncombat situations that could arise in either military or civilian communities where service members, or their units, may be. These situations may, or may not, be mass casualty situations.

Proponent and exception authority. Not applicable.

Impact on New Manning System This

publications does not contain information that affects the New Manning System.

**Interim changes.** Interim changes to this pamphlet are not official unless they are authenticated by The Adjutant General. Users will destroy interim changes on their expiration dates unless sooner superseded or rescinded.

**Suggested Improvements.** The proponent of this publication is the office of The Surgeon General. Submit changes for improving this publication on DA Form 2028 (Recommended Changes to Publications and Bland Forms) directly to Commandant, Academy of Health Sciences, U.S. Army, HSHA-TLD, Fort Sam Houston, TX 78234–6100.

**Distribution.** Active Army, B; ARNG, A; USAR, A.

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#### **Glossary**

**RESERVED** 

#### 1. Purpose

To comply with AR 40–3, this pamphlet outlines requirements and provides guidance for training all *Army personnel* in medical emergencies. The management of mass casualties is emphasized.

#### 2. References

- a. Required and related publications are listed in appendix A.
- b. Related training aids and devices are listed in appendix B.

#### 3. Explanation of abbreviations and terms

Abbreviations and special terms used in this pamphlet are explained in the glossary.

#### 4. Background

In a mass casualty situation, *Army Medical Department (AMEDD)* personnel will have to accept and perform many medical tasks beyond those required in a standard combat situation. *Nonmedical* personnel will have to perform first aid, rescue operations, and other tasks vital to the sufficient handling of large numbers of casualties. For example, if nuclear warfare occurs, commanders will be confronted with medical support problems basically similar to those of non–nuclear warfare. However, those problems will be compressed into a brief time element to a degree never before encountered and will include casualties resulting from later radiation effects. Such a situation will require that all personnel unite their efforts to bridge the gap between casualties and medical capabilities.

#### 5. Requirements

- a. Commanders at all echelons will-
- (1) Train assigned personnel to attain and maintain the standards of proficiency in first aid outlined in FM 21–11. This training will be conducted by or under the direct supervision of qualified AMEDD personnel.
- (2) Integrate first aid, emergency care, and emergency medical treatment training into field exercises.
  - b. Commanders of Reserve Component units will-
- (1) Determine the extent of additional training required to attain the standards of proficiency outlined in this pamphlet.
- (2) Integrate instructions with other scheduled training to the greatest extent possible.
  - c. Director of medical activities will-
- (1) Supervise the medical training of troops under the jurisdiction of the installation commander.
  - (2) Plan for emergencies and coordinate such planning.

#### 6. Conducting training

a. Students will be trained in first aid at training centers, using FM 21-11. This FM includes detailed procedures that apply to all

- types of casualties. The student will evaluate a casualty and then administer first aid. Instructors and assistants should be used throughout the process to supervise the student closely and make on–the–spot corrections.
- b. Unit training will be conducted in such a way and with the frequency necessary for personnel to attain and maintain proficiency.
- c. Acquisition of supplies essential to the conduct of required training will be a proper charge to the appropriate normal cost program employed locally for individual or unit training.
- d. Training aids listed in appendix B will be requisitioned through normal channels.
- e. A listing of instructional material for unit training is provided in DA Pam 350–108–1.

#### 7. Minimum standards of proficiency

Despite military occupational specialty (MOS) or special skill identifier (SSI), all Army personnel will have a working knowledge of the application of first aid (FM 21–11) and of field hygiene and sanitation (FM 21–10)

- a. Besides proficiency in their duty MOS or SSI, all AMEDD personnel will attain and maintain proficiency in the procedures shown in table 1.
  - b. Despite their specialty, Medical Corps officers should have-
- (1) A sufficient level of knowledge and proficiency to teach or supervise the teaching of all skills outlined in table 2.
- (2) A working knowledge of the application of procedures used in their given specialty; for example, trauma and mass—casualty care. Those with 1 year or more of general surgery should be able to perform emergency surgical procedures, including initial care for trauma cases.
- c. In addition to proficiency in their SSI, Army Nurse Corps officers should have a-
- (1) Level of knowledge and proficiency sufficient to teach or supervise the teaching of all skills and proficiencies outlined in table 2.
- (2) Working level of knowledge of the application in trauma and mass casualty care of procedures used in their given specialty.
- d. In addition to proficiency in their MOS, physician assistants should have a level of knowledge and proficiency sufficient to teach or supervise the teaching of all skills and proficiencies outlined in table 2.

Table 1	
<b>Proficiency</b>	requirements

Procedures	MC ANC WO <sup>a</sup> EM <sup>a</sup>	DC	VC	MSC	AMSC <sup>a</sup>	AMSC <sup>b</sup>	WOp	WOc	WO <sup>d</sup>	EM <sup>b</sup>
	Livi		1	<u> </u>	1	<u> </u> 	<u> </u>	<u> </u>	<u> </u> 	
Concept of medical sorting(triage)	1.		1.	1.	1.			1.		
Burns	1.		1.		1.	1				•
Collection of blood	1.		1.							
Parenteral fluid therapy	-			ŀ	1					•
Care of maxillofacial injuries										
Assisting in major surgery	١.		.	ŀ	1					
Duties of the scrub and circulation nurse	·									
Preoperative and postoperative care	.									
Use of tubes	١.		1.							
Preparation of sterile supplies	1.	١.	1.		١.	١.				
Blood pressure, temperature, pulse, and respiration	١.	١.	1.	1.	١.					١.
Urinary bladder catheterization administration of enemas										
Major aspects of psychological care								١.		
Cardiopulmonary resuscitation	'	1	Ι΄.	[ -		[		Ι.		[
Suturing technique	1.		Ι΄.		-		•	1	•	
Control of bleeding and prevention of shock	1.		1.					1		

Table 1	
Proficiency	requirements—Continued

Procedures	MC ANC WO <sup>a</sup> EM <sup>a</sup>	DC	VC	MSC	AMSC <sup>a</sup>	AMSC <sup>b</sup>	WOb	WOc	WO <sup>d</sup>	EM <sup>b</sup>
Management of soft tissue wounds Fractures, sprains, and dislocations										

Notes:

\* AMSC<sup>a</sup> Less dietitians.

AMSC<sup>b</sup> Dietitians only.

WO<sup>a</sup> Physicians Assistants.

WO<sup>b</sup> Veterinary.

WO<sup>c</sup> Medical equipment repair technician.

WO<sup>d</sup> Aviator

EM<sup>a</sup> Those with patient care MOS.

EM<sup>b</sup> Those with nonpatient care/MOS.

Table 2	
Subject and general scope of instructi	on

Subject and genera	scope of instruction	
Subject	Scope of instruction	References
Concept of medical sorting (triage)	Define mass—casulty situation. Discuss the order of priority of patient care. Define and discuss triage. Relationship between logistical assets (personnel, equipment, supplies, facilities) and patient needs.	FM 8–230.
Burns	Brief review of causes of burns. Definition and measurement of the depth (degree) and extent (percent) of burn. Emergency and definitive treatment of burns to include discussion and practical exercise in the use of fluid formula in calculating IV fluid requirements.	FM 21–11, FM 8–230.
Collection of blood	Explanation and demonstration of venipuncture technique. Practical exercise (using training models) in the collection of blood samples, and preparing and instituting IV fluid therapy.	8–273–2.
Parenteral fluid therapy	Definition of purposes and types of parenteral solutions, including dextran, sanline, Ringer's lactate, and glucose. Discuss indications and possible complications of parental fluid therapy.	FM 8–230, FM 8–273–1, FM 8–273–2.
Care of maxillofacial injuries	Discussion of emergency medical treatment of maxillofacial injuries to include methods of maintenance of airway, control of bleeding, prevention and treatment of shock, and application of appropriate dressings.	FM 21–11, FM 8–230.
Assisting in major surgery	Review of basic principles and practices of sterile technique. Discuss, in general, the duties of the first and second assistant in relation to the conduct of an operative procedure.	FM 8-73, FM 8-74, FM 8-273-2.
Duties of the scrub and circulating nurse	Discussion and demonstration of preparation of the operating room for surgery, with emphasis on duties of the scrub and circulating nurse as members of the team, before, during and after a surgical procedure.	FM 8–73, FM 8–74, FM 8–273–2.
Preoperative and postoperative care.	Discussion of the principles of preparing a patient for surgery. General discussion of patient recovery and normal routine of postoperative care.	FM 8-73, FM 8-74, FM 8-230, FM 8-273-1
Use of tubes	Discussion and demonstration of the indications, use, and routine care of thoracotomy, intratracheal and nasogastric tubes.	FM 8–230, FM 8–273–1, –2.
Preparation of ster- ile supplies	Discussion of principles of sterilization by moist and dry heat, and by chemical means. Preparation of sterile supplies by the above techniques.	FM 8-38, FM 8-73, FM 8-74, FM 8-230.
Blood pressure, temperature, pulse, and respiration	Discussion, demonstration, and practical exercise in the techniques of determining oral and rectal temperature, pulse rate, and systemic blood pressure.	FM 8–230, FM 8–273–1.
Urinary bladder catheterization administration of enemas	Discuss diagnostics and therapeutic indications for catheterization of urinary bladder. Demonstration of proper techniques of catheterization. Discussion of the indications, types, and methods of administering enemas to include emphasis on safeguards and contraindications.	FM 8–230, FM 8–273–2.
Major aspects of osychological care	Disxussion of the general types of reactions to severs stress and injury to include general supportive methods of therapy that are within the capabilities of the nonspecialist.	FM 21–11, FM 8–230.
Cardiopulmonary resuscitation	Outline the basic steps in emergency medical treatment (A, B, C, D of emergency medical treatment). Describe and discuss the signs of respiratory and cardiac arrest. Demonstration and practical exercise in the essential steps of mouth—to—mouth resuscitation and closed chest—heart massage	FM 21–11, FM 8–230, FM 8–273–1.
Suturing technique	Review principles of wound healing. Discussion, demonstration, and practical exercise (if feasible) on the techniques of suture closure of wounds. Emphasize on–the–job training to acquire proficiency.	FM 8–73, FM 8–74.
Control of bleeding and prevention of shock	Discuss the sources, signs annot symptons, and the emergency treatment procedures for major hemorrhage. Define shock and discuss the various types of shock, their recognition, and the emergency procedures to be taken for the prevention and control of shock.	FM 8–230, FM 21–11.
Management of soft tissue wounds	Differentiate the effects of high— and low— velocity missile injuries. Discuss the concepts of debridement and delayed primary closure. Differentiate between wound contamination and wound infection, list the signs of local wound infection, and discuss the methods of preventing wound infection.	FM 8–230
Fractures, sprains, and dislocations	Define fracture, sprain, strain, and dislocation. Discuss open versus closed and displaced versus non-displaced fractures. List the common signs, symptons, and possible acute complications of fractures and outline the emergency treatment of fractures.	FM 21–11, FM 8–230, FM 8–273–1.

## Appendix A References

#### Section I Required Publications

#### AR 40-3

Medical, Dental, and Veterinary Care (Cited in para 1.)

#### DA Pam 350-108-1

Division, Brigade and Group Health Services (ARTEP 8-25, 8-112). (Cited in para 6e.)

#### FM 8-38

Centralized Materiel Service/Section. (Cited in table 2).

#### FM 8-73

Introduction to Operating Room Technique (Berry and Kohn's). (Cited in table 2).

#### FM 8-74

Alexander's Care of the Patient in Surgery. (Cited in table 2.)

#### FM 8-230

Medical Specialist. (Cited in table 2.)

#### FM 8-273-1

Nursing Kills for Allied Health Services, Volumes 1 and 2, Nursing Skills for Clinical Practice, Third Edition. (Cited in Table 2.) (This FM and FM 8–273–2 have been distributed on a limited basis. In the near future, they will be available through normal distribution channels. In the meantime, they may be procured through installation medical libraries from the W.B. Saunders Company, West Washington Square, Philadelphia, PA 19105.)

#### FM8-273-2

Nursing Skills for Allied Health Services, Volume 3, Second Edition. (Cited in table 2.)

#### FM 21-10

Field Hygiene and Sanitation. (Cited in para 7.)

#### FM 21-11

First Aid for Soldiers. (Cited in paras 5a(1), 6, 7, and table 2.)

#### Section II

#### **Related Publications**

A related publication is merely a source of additional information. The user does not have to read it to understand this pamphlet.

#### AR 40-61

Medical Logistics Policies and Procedures

#### CMH Pub 83-3

DOD, Emergency War Surgery: First United States Revision of the Emergency War Surgery NATO Handbook, Edited by Thomas J. Whelan, Jr., M.D.

#### DA Pam 50-3

The Effects of Nuclear Weapons

#### DOD 5040.2-C-1

Department of Defense Catalog of Audiovisual Productions-Army Productions

#### DOD 5040.2-C-2

Department of Defense Catalog of Audiovisual Productions-Navy and Marine Corps Productions

#### DOD 5040.2-C-3

Department of Defense Catalog of Audiovisual Productions-Air Force and Miscellaneous DOD Productions

#### DOD 5040.2-C-4

Department of Defense Catalog of Audiovisual Productions-DOD Productions Cleared for Public Release

#### FM 8-10

Health Service Support in a Theater of Operations

#### FM 8-35

Evacuation of the Sick and Wounded

#### FM-21-40

NBC (Nuclear, Biological, and Chemical Defense)

#### FM 21-48

Planning and Conducting Chemical, Biological, Radiological (CBR) and Nuclear Defense Training

#### FM 21-76

Survival, Evasion, and Escape

#### FM 101-31-1

Staff Officers' Field Manual: Nuclear Weapons Employment Doctrine

#### FM 101-31-3

Staff Officers' Field Manual: Nuclear Weapons Employment Effects Data

#### **TB MED 81**

Cold Injury

#### **TB MED 162**

Care of Patients with Injuries of the Spinal Cord

#### TB MED 234

Anesthesia, Resuscitation, and Early Care of Wounded; Use of Morphine

#### TB MED 507

Occupational and Environmental Health Prevention, Treatment and Control of Heat Injury

#### TC 21-76

Personal Health Training for Personnel in Basic Training

#### TM 8-285

Treatment of Chemical Agent Casualties and Conventional Military Chemical Injuries

#### Appendix B

#### Army training Aids and Devices

#### Section I Training Devices

#### DVC 08-01

Nursing Technical Training Doll

#### DVC 08-04

War-Wounded Moulage Set

#### **DVC 08-05**

Intravenous Therapy Trainer

**DVC 08-06** 

Arterial Blood Action Simulator

DVC 08-14

Casualty Simulation Kit

**DVC 08-15** 

Resuscitation Training Manikin

DVC 08-20

Infant Resuscitation Training Manikin

Section II

**Films** 

PMF 5167

Heat Disorders: Heat Exhaustion, Heat stroke, and Heat Cramps

PMF 5304

Debridement, Part I, Multiple Soft Tissue Wounds

**PMF 5305** 

Debridement, Part II, Wounds of the Extremities

**PMF 5318** 

Management of Burns, Part I, Supportive Care

PMF 5324

A Method of Teaching Combat Surgery

PMF 5336

Total Body Measurement of Natural and Acquired Radioactivity in Man

PMF 5402

Massive Crush Injury

PMF 5443

Arterial Injury by High and Low Velocity Missiles

TF 8-2198

Resuscitation Care of the Severely Wounded

TF 8-2712

Management of Mass Casualties, Part X, Management of Psychological Casualties

TF 8-2881

Management of Mass Casualties-Medical Aspects of Nuclear Weapons

TF 8-3143

Management of Mass Casualties-Food and Water, Detection of Radiation and Contamination

TF 8-3224

Emergency Airway-A Plan of Action (Emergency Restoration of Breathing)

TF 8-3225

Thoracentesis

TF 8-3226

Intercostal Nerve Block

TF 8-3229

Gastric Intubation

TF 8-3231

Care of the Closed Thoracotomy Tube

TF 8-3693

Emergency Medical Care-Shock

TF 8-3872

Use of Inhalation Therapy Equipment, Part I, Simple Applications

#### **Glossary**

Section Abbreviations

**AMEDD** 

Army Medical Department

**AMSC** 

Army Medical Specialist Corps

**ANC** 

Army Nurse Corps

DA

Department of the Army

DC

Dental Corps

 $\mathbf{EM}$ 

enlisted member

FM

field manual

MC

Medical Corps

MOS

military occupational specialty

MSC

Medical Service Corps

NATO

North Atlantic Treaty Organization

OSTAG

Quadripartite Standardization Agreement

**STANAG** 

standardization agreement

SSI

specialty skill identifier

VC

Veterinary Corps

wo

warrant officer

Section II Terms

Nonmedical personnel

Includes all arms and services, less the AMEDD

AMEDD personnel with patient-care military occupational specialty (MOS) or specialty skill identifier (SSI)

Includes Army Medical Department personnel who are professionally qualified for or are related to the science or practice of medicine and are customarily charged with the direct care and supervision of patients.

### AMEDD personnel with nonpatient care MOS or SSI

Includes members of the Army Medical Department other than professional personnel customarily charged with the direct care and supervision of patients. They are connected with some ancillary branch or science of medicine but are not directly involved in patient care.

## Section III Special Abbreviations and Terms This postion contained no activities

This section contained no entries.

# USAPA

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